

400 Santa Barbara Blvd. City of Cape Coral Phone: (239)574-0575
 Cape Coral, Florida Lake Kennedy Senior Center Fax (239)574-0492
 Questions or Concerns on the day of the event contact Kitty Sayers (239)707-4225
 Mailing Address: P.O. Box 150027, Cape Coral, FL. 33915-0027

Request for Rental of Facility

Today's Date _____ Date of Event _____
 Responsible Organization or Individual _____
 Phone # _____ Work # _____ Other # _____
 Address _____
 Time: from _____ to _____ Decorating Date/Time _____
 Nature of Function _____ # people _____ (maximum 160) _____ * Initial

Rates for rental:

	Amount	Date Paid	Receipt #
A) Deposit	\$200.00		\$ _____
(Refunded after event - #4 below)			
B) Ballroom (7 hours)	\$550.00		\$ _____

7 hours includes set-up, event and clean-up

D) Each additional hour over 7hrs	\$50.00		\$ _____
E) 6.5% sales tax			\$ _____
F) Liability Insurance (non-refundable)	\$105.00 (w/food)		\$ _____
G) Liability Insurance (non-refundable)	\$85.00 (No food)		\$ _____
H) Total Due			\$ _____

ALL RENTALS MUST END By 11:00pm, BE CLEANED-UP AND OUT OF BLDG. BY 12 MIDNIGHT! NO EXCEPTIONS!!! (Renter must initial) INT. _____

Payment of rental deposit must be made at time of booking. Booking is confirmed if payment is received and request form is properly filled out and initialed by a Lake Kennedy Senior Center staff member.

*****90 days advance notice is required for cancellation of function for full refund.**

Any cancellation within 90 days of event will forfeit \$50.00 of deposit.

*****RENTAL REPRESENTATIVE MUST BE PRESENT AT ALL TIMES DURING RENTAL USAGE.**

*****BALANCE DUE MUST BE PAID 3 DAYS PRIOR TO DAY OF EVENT. IF PAYING BY CHECK, PAYMENT IN FULL IS DUE TEN (10) DAYS PRIOR TO DAY OF EVENT.**

*****ANY CHANGES IN ATTENDANCE OR SCHEDULED HOURS MUST BE MADE 30 DAYS IN ADVANCE. INT. _____**

1. **DO NOT DRAG TABLES, CHAIRS, OR ANYTHING THAT WOULD DAMAGE FLOOR.**
2. **SMOKING IS NOT PERMITTED WITHIN THE BUILDING. SMOKERS MUST USE CIGARETTE URNS PROVIDED AT THE ENTRANCE AREA IN THE FRONT OF THE BUILDING.**
3. **CANDLE DECORATIONS MUST BE FLOATING CANDLES OR IN GLASS CONTAINER, OPEN FLAMES ARE PROHIBITED.**

4. DEPOSIT WILL BE RETURNED WITHIN THREE (3) WEEKS FOLLOWING YOUR EVENT PROVIDED THE FACILITY IS LEFT IN SATISFACTORY CONDITION AND THERE IS NO DAMAGE, UPON INSPECTION BY STAFF.
5. RENTER IS RESPONSIBLE FOR SET UP OF TABLES & CHAIRS, CLEAN UP, AND SET UP AND REMOVAL OF ALL DECORATIONS USED. SUFFICIENT TIME SHOULD BE ALLOWED FOR CLEAN-UP.
6. RENTERS MUST CLEAN UP ALL TRASH AND REMOVE TRASH TO DUMPSTER LOCATED OUTSIDE THE KITCHEN AREA.
7. ALL AREAS MUST BE LEFT IN ORIGINAL ORDER/CONDITION EXCEPT BREAKDOWN OF TABLES AND CHAIRS. FLOORS MUST BE SWEEPED, BUT MOPPING IS NOT NECESSARY. *INITIAL_____
8. DO NOT HANG ANY ITEMS FROM ANY PART OF CEILING, DISCO BALL, FANS, SPRINKLERS, OR MIRRORS. NO TAPE ON FLOOR OR MIRRORS.
9. NO BIRDSEED, RICE, CONFETTI, HAY BALES, BUBBLES, MIST MACHINES, FOG MACHINES, GLITTER OR ANY OTHER MATERIAL INSIDE OR OUTSIDE OF FACILITY. *INT._____
10. NO CASH BARS ALLOWED.
11. NO WET CONTAINERS ARE ALLOWED TO BE PLACED AT ANY TIME ON THE BALLROOM FLOOR; THEY MUST BE UP ON A TABLE. (THIS INCLUDES ANYTHING CONTAINING ICE, ICE COOLERS OR ANY MOISTURE PRODUCING ITEM/MATERIAL).
12. NO BEER KEGS ALLOWED IN BUILDING.
13. NO ALCOHOLIC BEVERAGES MAY BE CONSUMED BY ANYONE UNDER 21 YEARS OF AGE. IF THIS OCCURS, CAPE CORAL POLICE WILL BE CONTACTED IMMEDIATELY AND RENTAL TERMINATED.
14. NO ALCOHOLIC BEVERAGES OR ANY TYPE OF BEVERAGES ALLOWED OUTSIDE OF FACILITY. STRICTLY ENFORCED! FAILURE TO COMPLY CAN RESULT IN RENTAL TERMINATION BY CITY STAFF. _____ * INT.
15. CHILDREN MUST BE SUPERVISED AT ALL TIMES. NO EXCEPTIONS! NO CHILD SHOULD LEAVE THE BUILDING WITHOUT ADULT SUPERVISION.
16. BEHAVIORS DEEMED AS UNSAFE CAN BE CAUSE FOR IMMEDIATE TERMINATION OF THE RENTAL BY CITY STAFF.

In consideration of the use of the Lake Kennedy Senior Center, located at 400 Santa Barbara Boulevard, I _____ agree to indemnify and hold harmless the City of Cape Coral from and against all claims, suits, damages, costs, losses, and expenses in any manner resulting from, arising out of, or connected with their event, to be held on the above date. Any litigation arising out of this rental agreement, the prevailing party shall be entitled to reasonable attorney' fees.

Name of Representative _____ Date _____

Phone # _____ Email _____

For LKSC Staff Use Only

Booked by _____ Date _____

Revised 1/15/19